

Gearing Up for 2016-17 Enrollment

Residency Verification Webinar



Tuesday, March 8, 2016

2:00pm - 4:00pm

**Office of Enrollment and Residency
Office of the State Superintendent of Education**

Agenda

- ❖ Welcome/ Purpose
- ❖ Residency Verification Overview
- ❖ Documentation Review / Changes
 - ❖ Residency Verification Form
 - ❖ Attestation of Other Primary Caregiver Form
 - ❖ Sworn Statement of Other Primary Caregiver Form
 - ❖ Home Visitation Verification Form/ Home Visitation Consent Form
- ❖ Acceptable Forms of Documentation
- ❖ Admission of Non-Resident Tuition-Paying Students
- ❖ Residency Fraud Prevention Overview
- ❖ Questions

Residency Verification Overview

Residency Verification Overview

- Per DC Code 38-301 – 38-313, all students attending programs funded by district local funds must provide proof of DC residency to receive a free education.
 - DCPS
 - PCS
 - Non-Publics
 - CBOs
- LEA/CBO should collect and verify documentation for all enrolled students.
- Tuition-paying non-resident students should not be admitted if LEA has current District residents on waiting list.
 - If no waiting list, school should refer student to OSSE for tuition payment agreement before enrolling.
- Documentation for SY 2016-17 should only be accepted on or after April 1, 2016.

Residency Verification Overview – cont'd

LEA/CBO contact with parent / caregiver or adult student is crucial. Follow-up may uncover important information that triggers affirmative responsibilities:

- Homeless student – in lieu of supporting residency documentation, upload a *Homeless Student Referral Form to the McKinney-Vento Homeless QuickBase Application*
- Ward of DC Adoption – *student is allowed to complete educational program at the school. (e.g. if school is K-8 and student is in grade 5, student can continue at school until the end of the eighth grade)*
- Possible non-resident student – *gather evidence and notify OSSE via Residency Fraud Prevention hotline to investigate.*
- Other scenarios where student just cannot provide documents – offer a *home visit or refer to OSSE Office of Enrollment & Residency.*

Homeless Definition

Per McKinney-Vento, homeless children and youth are:

Children and youth who lack a fixed, regular and adequate nighttime residence;

Children and youth:

- sharing the housing of others due to loss of housing, economic hardship, or similar reason
- living in temporary housing such as motels, hotels, trailer parks, camping grounds due to lack of adequate alternative accommodations
- living in emergency or transitional shelters
- abandoned in hospitals
- awaiting foster care placement
- living in a public or private place not designed for humans to live such as cars, parks, abandoned buildings, bus or train stations, etc.;

Migratory children living in above circumstances;

Unaccompanied youth, including youth who are not in the physical custody of a parent or guardian, who qualify as homeless because they live in circumstances described above; and

Children and youth in the care of a federally appointed sponsor.

Special Circumstance – Ward of DC Adoption

Educational Continuity Act

“[A] child in the care and custody of the District pursuant to DC Official Code § 16-2320(a)(3) who, while attending a DCPS or public charter school, ceases to be in that care and custody as a result of being placed in the permanent care and custody of a parent, guardian, or custodian who resides outside the District of Columbia shall be considered a resident of the District of Columbia for the purpose of school attendance and shall be exempt from the requirement to pay tuition for the period of time until the child completes the educational program offered at the school the child currently attends”

What do LEAs and schools need to do in this situation?

- Complete DCRV and mark “Ward of DC” option.
- Ward of State option will take precedence over address field

Documentation Review/Changes to Forms

2016-17 Residency Verification Form

- Only page 1 is required to be completed in most cases (except other primary caregiver).
- Clarified wording pertaining to document requirements.
- Added an Acceptable Document Checklist
- Incorporated wording to specifically address adult students.
- Reduced the number of times the parent's name appears on the form to eliminate the potential for conflicting information.
- However, the allowable supporting documents remain the same.

➤ *Special thanks to our LEA working group for giving feedback and suggestions for how to improve and enhance the form.*

LEA Working Group:

Apple Tree – Juanita White

Carlos Rosario – Marina Eisenberg

DCPS – Zaneta Graves, Elizabeth Goff,

Lauren Fryer-Lewis, Roberta Kleekpo

FOCUS – Michael Musante

OSSE – Rochelle Wilson, Lauren Lynch

St. Coletta – Catherine Decker

Briya – Jodi Birkey

DC Prep – Sindy Tavaréz

EL Haynes – Kristin Yochum


Ingenuity Prep – Amanda Lumnah

PCSB – Melodi Sampson

The Next Step – Jarolyn Alvarez Dobson

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 **OSSE**

Name of LEA/School _____

DC RESIDENCY VERIFICATION FORM

Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

Choose (i) or (ii). If other primary caregiver is chosen, Part D (page 2) must be completed:

(i) I am the ☐ parent/guardian who enrolled _____ in school. (Student Full Name)
☐ other primary caregiver

(ii) I am the ☐ adult student who enrolled myself, _____ in school. (Adult Student Full Name)
An adult student is at least 18 years old or an emancipated minor.

I, the parent/guardian/caregiver or adult student, affirm that I reside at the following address:

(Parent/Guardian/Caregiver or Adult Student Home Address)

Part B. General Residency Verification (must be completed by school official for all students)

The person who enrolled the student or the adult student has presented the following as proof of his/her District of Columbia residency.
Each item must contain the name of the person enrolling the student or the name of the adult student and his/her DC address along with the criteria below.
(Refer to List of Acceptable Supporting Documentation Checklist on page 3 for detailed explanations.)

(A) One of the following items:

- ☐ Pay stub, issued within 45-day window prior to school's review of residency documentation, showing withholding of DC personal income tax.
- ☐ Unexpired official documentation of financial assistance from the DC Government including TANF, Medicaid, SCHIP, SSI, housing assistance or other DC governmental programs.
- ☐ Certified copy of DC Tax Form D40.
- ☐ Military housing orders.
- ☐ Embassy letter.

(B) If one of the following applies, no signature is required in Part C:

- ☐ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
- ☐ Child is a ward of the District of Columbia.

(C) Two of the following items with matching names and addresses:

- ☐ Unexpired DC motor vehicle registration.
- ☐ Unexpired lease with proof of payment within 2 months preceding school's review of residency documents.
- ☐ Unexpired DC driver's license or non-driver ID.
- ☐ Utility bill with proof of payment within 2 months of school's review of residency documentation.

(D) Use only if none of the previous options apply.

- ☐ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the Home Visitation Residency Verification Form and Home Visitation Consent Form have been completed to confirm residency.

I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office of the Attorney General, etc. upon request.

School Official (Print) _____ School Official (Signature) _____ Date _____

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (b) applies.


I understand the enrollment of the student in District of Columbia public schools or public charter school, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under DC Code §38-322, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information related to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student) _____ (Phone Number) _____

(Signature of Parent/Guardian/Caregiver or Adult Student) _____ (Date) _____

Penalty for False Information:
Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1990 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (DC Code §38-312). The use of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

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 **OSSE**

Part D. Other Primary Caregiver Verification

Only complete this section if the person enrolling the student is NOT the parent, legal guardian, or court appointed custodian of the student. Section must be completed by school official ONLY.

An "other primary caregiver" is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. Other primary caregivers must establish DC residency as required in Part B, in addition to establishing his/her status as an "other primary caregiver". The following are examples of when an "other primary caregiver" status applies:

- Parent has abandoned the child
- Parent is incarcerated
- Does not live with the child due to neglect and/or abuse
- Parent is deceased
- Parent suffers from serious illness
- Parent is on active military assignment


I hereby certify that the caregiver named in Part A of this form has confirmed "other primary caregiver" status using one (1) of the choices above and presented one (1) of the following documents verifying his/her status as an "other primary caregiver":

- ☐ Records from the previous school year indicating that the student is in the care of the caregiver, including, but not limited to, a signed report card; immunization or medical records issued within the last twelve (12) months immediately preceding the school's review of the residency documentation, indicating that the student is in the care of the caregiver.
- ☐ Unexpired official documentation from the federal government or the Government of the District of Columbia with an issue date within the last twelve (12) months immediately preceding the school's review of residency documentation, indicating that the caregiver receives public or medical benefits on behalf of the student, including, but not limited to, Supplemental Security Income annual benefits notification or TANF verification of income notice or certification approval letter.
- ☐ A completed and signed Sworn Statement of Other Primary Caregiver form (issued by OSSE) indicating that he/she is the primary caregiver for the student, or
- ☐ An Attestation for Other Primary Caregiver form (issued by OSSE) completed and signed by a legal, medical or social service professional attesting to the caregiver's status relevant to the student and issued within the last twelve (12) months immediately preceding the school's review of residency documentation.

I certify, under the penalty of perjury, that I have personally reviewed the documents presented and affirm that the information represented above pertaining to other primary caregiver verification is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office to the Attorney General, etc. upon request.

School Official (Print) _____ School Official (Signature) _____ Date _____

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 **OSSE**

List of Acceptable Supporting Documentation Checklist

Part A (One is needed from this list to verify residency.)

- ☐ Pay stub, issued within the forty-five (45) day window immediately preceding the school's review of residency documentation, that contains the name of person enrolling the student or the name of the adult student, shows his/her current DC home address, and shows withholding of DC personal income tax for the current tax year.
- ☐ Unexpired official documentation of financial assistance from the Government of the District of Columbia: issued to the person enrolling the student or the adult student within the past twelve (12) months and be current at the time presented to the school, including, but not limited to, Temporary Assistance for Needy Families (TANF), Medicaid, the State Child Health Insurance Program (SCHIP), Supplemental Security Income, housing assistance or other programs.
- ☐ Certified copy of Form D40: Certified by the DC Office of Tax and Revenue, with the name of person enrolling the student or the name of the adult student as evidence of payment of DC taxes for the current or most recent tax year.
- ☐ Military housing orders: Showing the name of the person enrolling the student or the name of the adult student, and their residency or home address in DC, including but not limited to a DEERS statement or other official communication on military letterhead.
- ☐ Embassy letter: Issued within the past twelve (12) months showing the name of the person enrolling the student or the name of the adult student, indicating that the caregiver and the dependent student or the adult student currently live an embassy property in the District of Columbia or will reside on DC property confirmed by the embassy during the relevant school year, and an official embassy seal.

Part B (If one of these applies, no signature is required in Part C.)

- ☐ Homeless: There is evidence that the student is homeless and the school's homeless liaison has provided the appropriate homeless documentation.
- ☐ Ward of the District of Columbia: Proof that child is a ward of the District of Columbia, in the form of a court order or official documentation from DC Child and Family Services Agency.

Part C (Two are needed from this list to verify residency. The address and name on each of the items must be the same.)

- ☐ Unexpired DC motor vehicle registration showing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.
- ☐ Unexpired lease or rental agreement with proof of payment of rent, in the name of the person enrolling the student or the name of the adult student, for a period within two (2) months immediately preceding the school's review of residency documentation, for the current DC address at which the student actually resides.
- ☐ Unexpired DC motor vehicle operator's permit or official government issued non-driver identification in the name of the person enrolling the student or the name of the adult student showing his/her current DC home address.
- ☐ Utility bill (only gas, electric, and water bills are acceptable) with proof of payment of a bill, from a period within the two (2) months immediately preceding the school's review of residency documentation, listing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.

2016-17 Residency Verification Form – cont'd

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Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

Choose (i) or (ii). If other primary caregiver is chosen, Part D (page 2) must be completed:

- (i) I am the ☐ **parent/guardian** who enrolled _____ in school.
☐ **other primary caregiver** (Student Full Name)
- (ii) I am the ☐ **adult student** who enrolled myself, _____, in school.
An adult student is at least 18 years old or an emancipated minor. (Adult Student Full Name)

I, the parent/guardian/caregiver or adult student, affirm that I reside at the following address:

(Parent/Guardian/Caregiver or Adult Student Home Address)

____ housing assistance or other DC governmental programs.
____ Certified copy of DC Tax Form-D40.
____ Military housing orders.
____ Embassy letter.

(B) If one of the following applies, no signature is required in Part C.

____ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
____ Child is a ward of the District of Columbia.

____ review of residency documentation.

(D) Use only if none of the previous options apply.

____ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the **Home Visitation Residency Verification Form and Home Visitation Consent Form have been completed** to confirm residency.

I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office of the Attorney General, etc. upon request.

School Official (Print)

School Official (Signature)

Date

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (B) applies.

I understand that enrollment of the student in District of Columbia public schools or public charter schools, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under D.C. Code §38-312, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information relative to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student)

(Phone Number)

(Signature of Parent/Guardian/Caregiver or Adult Student)

(Date)


Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Residency Verification Form – cont'd

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Name of LEA/School _____

DC RESIDENCY VERIFICATION FORM

Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

Choose (i) or (ii). If other primary caregiver is chosen, Part D (page 2) must be completed:

Part B. General Residency Verification (must be completed by school official for all students)

The person who enrolled the student or the adult student has presented the following as proof of his/her District of Columbia residency. Each item must contain the name of the person enrolling the student or the name of the adult student and his/her DC address along with the criteria below.

(Refer to List of Acceptable Supporting Documentation Checklist on page 3 for detailed explanations.)

<input type="checkbox"/> Any other OSSE written policy which prior to school review of residency documentation, showing withholding of DC personal income tax.	<input type="checkbox"/> Unexpired DC motor vehicle registration.
<input type="checkbox"/> Unexpired official documentation of financial assistance from the DC Government including TANF, Medicaid, SCHIP, SSI, housing assistance or other DC governmental programs.	<input type="checkbox"/> Unexpired lease with proof of payment within 2 months preceding school's review of residency documents.
<input type="checkbox"/> Certified copy of DC Tax Form-D40.	<input type="checkbox"/> Unexpired DC driver's license or non-driver ID.
<input type="checkbox"/> Military housing orders.	<input type="checkbox"/> Utility bill with proof of payment within 2 months of school's review of residency documentation.
<input type="checkbox"/> Embassy letter.	

(B) If one of the following applies, no signature is required in Part C.

<input type="checkbox"/> There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.	<input type="checkbox"/> (D) Use only if none of the previous options apply.
<input type="checkbox"/> Child is a ward of the District of Columbia.	<input type="checkbox"/> The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the Home Visitation Residency Verification Form and Home Visitation Consent Form have been completed to confirm residency.

I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office of the Attorney General, etc. upon request.

School Official (Print) _____ School Official (Signature) _____ Date _____

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (B) applies.

I understand that enrollment of the student in District of Columbia public schools or public charter schools, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under D.C. Code §38-312, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information relative to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student) _____ (Phone Number) _____

(Signature of Parent/Guardian/Caregiver or Adult Student) _____ (Date) _____

Penalty for False Information:
Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Residency Verification Form – cont'd

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Name of LEA/School _____

DC RESIDENCY VERIFICATION FORM

Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

Choose (i) or (ii). If other primary caregiver is chosen, Part D (page 2) must be completed:

- (i) I am the ☐ parent/guardian who enrolled _____ in school.
(Student Full Name)
☐ other primary caregiver
- (ii) I am the ☐ adult student who enrolled myself, _____, in school.
(Adult Student Full Name)
An adult student is at least 18 years old or an emancipated minor.

I, the parent/guardian/caregiver or adult student, affirm that I reside at the following address:

(Parent/Guardian/Caregiver or Adult Student Home Address)

Part B. General Residency Verification (must be completed by all DC public school students)

The person who enrolled the student or the adult student has presented the following as proof of his/her District of Columbia residency.

Each item must contain the name of the person enrolling the student or the name of the adult student and his/her DC address along with the criteria below.

(Refer to List of Acceptable Supporting Documentation Checklist on page 3 for detailed explanations.)

- (A) One of the following items:
- ☐ Pay stub, issued within 45-day window prior to school's review of residency documentation, showing withholding of DC personal income tax.
 - ☐ Unexpired official documentation of financial assistance from the DC Government including TANF, Medicaid, SCHIP, SSI, housing assistance or other DC governmental programs.
 - ☐ Certified copy of DC Tax Form-D40.
 - ☐ Military housing orders.
 - ☐ Embassy letter.
- (B) If one of the following applies, no signature is required in Part C.
- ☐ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
 - ☐ Child is a ward of the District of Columbia.
- (C) Two of the following items with matching names and addresses:
- ☐ Unexpired DC motor vehicle registration.
 - ☐ Unexpired lease with proof of payment within 2 months preceding school's review of residency documents.
 - ☐ Unexpired DC driver's license or non-driver ID.
 - ☐ Utility bill with proof of payment within 2 months of school's review of residency documentation.
- (D) Use only if none of the previous options apply.
- ☐ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the **Home Visitation Residency Verification Form and Home Visitation Consent Form have been completed to affirm residency.**

I certify, under the penalties perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office of the Attorney General, and others upon request.

School Official (Print) _____

School Official (Signature) _____

Date _____

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

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(Printed Name of Parent/Guardian/Caregiver or Adult Student) _____

(Phone Number) _____

(Signature of Parent/Guardian/Caregiver or Adult Student) _____

(Date) _____

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2016-17 Residency Verification Form – cont'd

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- ☐ Pay stub, issued within 45-day window prior to school's review of residency documentation, showing withholding of DC personal income tax.
- ☐ Unexpired official documentation of financial assistance from the DC Government including TANF, Medicaid, SCHIP, SSI, housing assistance or other DC governmental programs.
- ☐ Certified copy of DC Tax Form-D40.
- ☐ Military housing orders.
- ☐ Embassy letter.

(C) If one of the following applies, no signature is required in Part C.

- ☐ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
- ☐ Child is a ward of the District of Columbia.

(B) Two of the following items with matching names and addresses.

- ☐ Unexpired DC motor vehicle registration.
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- ☐ Unexpired DC driver's license or non-driver ID.
- ☐ Utility bill with proof of payment within 2 months of school's review of residency documentation.

(D) Use only if none of the previous options apply.

- ☐ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the **Home Visitation Residency Verification Form** and **Home Visitation Consent Form** have been completed to confirm residency.

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School Official (Print)

School Official (Signature)

Date

2016-17 Residency Verification Form – cont'd

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Name of LEA/School _____

DC RESIDENCY VERIFICATION FORM

Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

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- (i) I am the ☐ **parent/guardian** who enrolled _____ in school.
(Student Full Name)
- ☐ **other primary caregiver**
- (ii) I am the ☐ **adult student** who enrolled myself, _____ in school.
(Adult Student Full Name)
An adult student is at least 18 years old or an emancipated minor.

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 - ☐ Certified copy of DC Tax Form-D40.
 - ☐ Military housing orders.
 - ☐ Embassy letter.
- (B) If one of the following applies, no signature is required in Part C.
- ☐ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
 - ☐ Child is a ward of the District of Columbia.
- (C) Two of the following items with matching names and addresses.
- ☐ Unexpired DC motor vehicle registration.
 - ☐ Unexpired lease with proof of payment within 2 months preceding school's review of residency documents.
 - ☐ Unexpired DC driver's license or non-driver ID.
 - ☐ Utility bill with proof of payment within 2 months of school's review of residency documentation.
- (D) Use only if none of the previous options apply.
- ☐ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the **Home Visitation Residency Verification Form and Home Visitation Consent Form have been completed** to confirm residency.

I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the Office of the Inspector General, DC Office of the Attorney General, upon request.

School Official (Print) _____

School Official (Signature) _____

Date _____

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (B) applies.

I understand that enrollment of the student in District of Columbia public schools or public charter schools, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under D.C. Code §38-312, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information relative to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student) _____

(Phone Number) _____

(Signature of Parent/Guardian/Caregiver or Adult Student) _____

(Date) _____

Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 1, 2009, and amended by the District of Columbia Public Schools and Public Charter Schools Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Residency Verification Form – cont'd

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (C) applies.

I understand that enrollment of the student in District of Columbia public schools or public charter schools, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under D.C. Code §38-312, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information relative to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student)

(Phone Number)

(Signature of Parent/Guardian/Caregiver or Adult Student)

(Date)

2016-17 Residency Verification Form – cont'd

Page 1 of 3



SY 2016-17 | Updated 3/16

Part A. Parent/Guardian/Caregiver or Adult Student Confirmation

Choose (i) or (ii). If other primary caregiver is chosen, Part D (page 2) must be completed:

- (i) I am the ☐ **parent/guardian** who enrolled _____ in school.
☐ **other primary caregiver** (Student Full Name)
- (ii) I am the ☐ **adult student** who enrolled myself, _____, in school.
An adult student is at least 18 years old or an emancipated minor. (Adult Student Full Name)

I, the parent/guardian/caregiver or adult student, affirm that I reside at the following address:

(Parent/Guardian/Caregiver or Adult Student Home Address)

____ housing assistance or other DC governmental programs.
____ Certified copy of DC Tax Form-D40.
____ Military housing orders.
____ Embassy letter.

____ review of residency documentation.

(D) Use only if none of the previous options apply.

(B) If one of the following applies, no signature is required in Part C.

____ There is evidence that the student is homeless and the homeless liaison has provided homeless documentation.
____ Child is a ward of the District of Columbia.

____ The person enrolling the student or the adult student has consented to a home visit. The visit is complete and the **Home Visitation Residency Verification Form** and **Home Visitation Consent Form** have been completed to confirm residency.

I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office of the Attorney General, etc. upon request.

School Official (Print)

School Official (Signature)

Date

Part C. Parent/Guardian/Caregiver or Adult Student Sworn Statement of DC Residency

Signature required except if Part B. (B) applies.

I understand that enrollment of the student in District of Columbia public schools or public charter schools, or other schools providing educational services funded by the District of Columbia, is based on my representation of DC residency, including this sworn statement of DC residency and my presentation of residency verification documentation. If this sworn statement is false, I understand that I am liable for payment of retro-tuition for the student, and that the student may be withdrawn from school. Additionally, I understand that, under D.C. Code §38-312, any person who knowingly supplies false information to a public official in connection with student residency verification shall be subject to payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both a fine and imprisonment. I hereby waive my rights to confidentiality of information relative to my residence and understand that the District of Columbia will use whatever legal means it has at its disposal to verify my residence. I also agree to notify the school of any change of residence for myself or the student within three (3) school days of such change.

(Printed Name of Parent/Guardian/Caregiver or Adult Student)

(Phone Number)

(Signature of Parent/Guardian/Caregiver or Adult Student)

(Date)


Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960, and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Residency Verification Form – cont'd

Page 2 of 3

SY 2016-17 | Updated 3/16



Part D. Other Primary Caregiver Verification

Only complete this section if the person enrolling the student is NOT the parent, legal guardian, or court appointed custodian of the student. Section must be completed by school official ONLY.

An "other primary caregiver" is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. Other primary caregivers must establish DC residency as required in Part B, in addition to establishing his/her status as an "other primary caregiver". The following are examples of when an "other primary caregiver" status applies:

- Parent has abandoned the child
- Does not live with the child due to neglect and/or abuse
- Parent suffers from serious illness
- Parent is incarcerated
- Parent is deceased
- Parent is on active military assignment

I hereby certify that the caregiver named in Part A of this form has confirmed "other primary caregiver" status using one (1) of the choices above and presented one (1) of the following documents verifying his/her status as an "other primary caregiver":

- ____ Records from the previous school year indicating that the student is in the care of the caregiver, including, but not limited to, a signed report card; Immunization or medical records issued within the last twelve (12) months immediately preceding the school's review of the residency documentation, indicating that the student is in the care of the caregiver;
- ____ Unexpired official documentation from the federal government or the Government of the District of Columbia with an issue date within the last twelve (12) months immediately preceding the school's review of residency documentation, indicating that the caregiver receives public or medical benefits on behalf of the student, including, but not limited to, Supplemental Security Income annual benefits notification or TANF verification of income notice or recertification approval letter;
- ____ A completed and signed Sworn Statement of Other Primary Caregiver form (issued by OSSE) indicating that he/she is the primary caregiver for the student; or
- ____ An Attestation for Other Primary Caregiver form (issued by OSSE) completed and signed by a legal, medical or social service professional attesting to the caregiver's status relevant to the student and issued within the last twelve (12) months immediately preceding the school's review of residency documentation.

I certify, under the penalty of perjury, that I have personally reviewed the documents presented and affirm that the information represented above pertaining to other primary caregiver verification is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office to the Attorney General, etc. upon request.

School Official (Print) _____ School Official (Signature) _____ Date _____

2016-17 Residency Verification Form – cont'd

Page 3 of 3



SY 2016-17 | Updated 3/16

List of Acceptable Supporting Documentation Checklist

Part A (One is needed from this list to verify residency.)

- ☐ **Pay stub:** Issued within the forty-five (45) day-window immediately preceding the school's review of residency documentation, that contains the name of person enrolling the student or the name of the adult student, shows his/her current DC home address, and shows withholding of DC personal income tax for the current tax year.
- ☐ **Unexpired official documentation of financial assistance from the Government of the District of Columbia:** Issued to the person enrolling the student or the adult student within the past twelve (12) months and be current at the time presented to the school, including, but not limited to, Temporary Assistance for Needy Families (TANF), Medicaid, the State Child Health Insurance Program (SCHIP), Supplemental Security Income, housing assistance or other programs.
- ☐ **Certified copy of Form D40:** Certified by the DC Office of Tax and Revenue, with the name of person enrolling the student or the name of the adult student as evidence of payment of DC taxes for the current or most recent tax year.
- ☐ **Military housing orders:** Showing the name of the person enrolling the student or the name of the adult student, and their residency or home address in DC, including but not limited to a DEERS statement or other official communication on military letterhead.
- ☐ **Embassy letter:** Issued within the past twelve (12) months showing the name of the person enrolling the student or the name of the adult student, indicating that the caregiver and the dependent student or the adult student currently live on embassy property in the District of Columbia or will reside on DC property confirmed by the embassy during the relevant school year, and an official embassy seal.

Part B (If one of these applies, no signature is required in Part C.)

- ☐ **Homeless:** There is evidence that the student is homeless and the school's homeless liaison has provided the appropriate homeless documentation.
- ☐ **Ward of the District of Columbia:** Proof that child is a ward of the District of Columbia, in the form of a court order or official documentation from DC Child and Family Services Agency.

Part C (Two are needed from this list to verify residency. The address and name on each of the items must be the same.)

- ☐ **Unexpired DC motor vehicle registration** showing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.
- ☐ **Unexpired lease or rental agreement with proof of payment of rent,** in the name of the person enrolling the student or the name of the adult student, for a period within two (2) months immediately preceding the school's review of residency documentation, for the current DC address at which the student actually resides.
- ☐ **Unexpired DC motor vehicle operator's permit or official government issued non-driver identification** in the name of the person enrolling the student or the name of the adult student showing his/her current DC home address.
- ☐ **Utility bill (only gas, electric, and water bills are acceptable) with proof of payment of a bill,** from a period within the two (2) months immediately preceding the school's review of residency documentation, listing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.

2016-17 Residency Verification Form – cont'd

Part A (One is needed from this list to verify residency.)

- ☐ **Pay stub:** Issued within the forty-five (45) day-window immediately preceding the school's review of residency documentation, that contains the name of person enrolling the student or the name of the adult student, shows his/her current DC home address, and shows withholding of DC personal income tax for the current tax year.
- ☐ **Unexpired official documentation of financial assistance from the Government of the District of Columbia:** Issued to the person enrolling the student or the adult student within the past twelve (12) months and be current at the time presented to the school, including, but not limited to, Temporary Assistance for Needy Families (TANF), Medicaid, the State Child Health Insurance Program (SCHIP), Supplemental Security Income, housing assistance or other programs.
- ☐ **Certified copy of Form D40:** Certified by the DC Office of Tax and Revenue, with the name of person enrolling the student or the name of the adult student as evidence of payment of DC taxes for the current or most recent tax year.
- ☐ **Military housing orders:** Showing the name of the person enrolling the student or the name of the adult student, and their residency or home address in DC, including but not limited to a DEERS statement or other official communication on military letterhead.
- ☐ **Embassy letter:** Issued within the past twelve (12) months showing the name of the person enrolling the student or the name of the adult student, indicating that the caregiver and the dependent student or the adult student currently live on embassy property in the District of Columbia or will reside on DC property confirmed by the embassy during the relevant school year, and an official embassy seal.

Part B (Two are needed from this list to verify residency. The address and name on each of the items must be the same.)

- ☐ Unexpired **DC motor vehicle registration** showing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.
- ☐ Unexpired **lease or rental agreement with proof of payment of rent**, in the name of the person enrolling the student or the name of the adult student, for a period within two (2) months immediately preceding the school's review of residency documentation, for the current DC address at which the student actually resides.
- ☐ Unexpired **DC motor vehicle operator's permit** or official government issued non-driver identification in the name of the person enrolling the student or the name of the adult student showing his/her current DC home address.
- ☐ **Utility bill (only gas, electric, and water bills are acceptable) with proof of payment of a bill**, from a period within the two (2) months immediately preceding the school's review of residency documentation, listing the name of the person enrolling the student or the name of the adult student and his/her current DC home address,.

Part C (If one of these applies, no signature is required in Part C.)

- ☐ **Homeless:** There is evidence that the student is homeless and the school's homeless liaison has provided the appropriate homeless documentation.
- ☐ **Ward of the District of Columbia:** Proof that child is a ward of the District of Columbia, in the form of a court order or official documentation from DC Child and Family Services Agency.

Documentation Review/Changes to Forms

Form Name	Form Overview	Form Changes for SY16-17
DC Residency Verification Form	<ul style="list-style-type: none"> - Documentation received (in its entirety) should match form. - School Official must print and sign Part B certifying all information is received and accurate. - If Other Primary Caregiver is used, LEA should sign Part D as well. - Person enrolling student or adult student should sign part C unless noted. 	<p>*If your “other primary caregiver” does not fall into one of the six choices in part D, contact OSSE for next steps</p>
Sworn Statement of Other Primary Caregiver Form	<ul style="list-style-type: none"> - “Other primary caregiver” is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her and whose parent, custodian, or guardian is unable to supply such care and support. 	<ul style="list-style-type: none"> - Updated language to align with the Residency Verification form

Documentation Review/Changes to Forms

Form Name	Form Overview	Form Changes for SY15-16
Attestation of Other Primary Caregiver Form	<ul style="list-style-type: none"> - Completed by a <u>legal, medical, or social service professional</u> attesting to the status of a person as an “other primary caregiver” to a minor child. - Residency Verification Form (Part D) should verify this form will be presented. 	<ul style="list-style-type: none"> - Removed “Other” option.
Home Visitation Consent Form Home Visitation Residency Verification Form	<ul style="list-style-type: none"> - When student cannot verify residency, LEA has the option to conduct a home visit - Both verification and consent form should be completed. - Part B, Section D should be checked on Residency Verification Form 	<ul style="list-style-type: none"> - No changes.

2016-17 Attestation of Other Primary Caregiver



SY 2016-17 | Updated 3/16

ATTESTATION FOR OTHER PRIMARY CAREGIVER

This form is to be completed by a legal, medical, or social service professional attesting to the status of a person as an "other primary caregiver" to a minor child. All information provided herein may be verified after the child has been enrolled in the District of Columbia Public Schools, a District of Columbia public charter school, or other school providing educational services funded by the District of Columbia.

An "other primary caregiver" is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. For the purpose of this form, "a parent unable to provide care and support" to a child if one of the conditions described in the check boxes below apply. A person seeking to enroll the student as "other primary caregiver" shall provide documentation, such as this form, that establishes his or her status as an "other primary caregiver" as well as documentation that establishes his or her residency status as required by District of Columbia law and regulations.

I, _____, and employed by _____, located at _____,

_____ and I hereby certify that _____,

who resides at _____, is the other primary caregiver of _____,

who resides at _____.

To the best of my knowledge the child's parent, court appointed custodian or guardian is unable to provide care and support to the child, because the parent, court appointed custodian or guardian (check any that apply):

- | | |
|---|--|
| <input type="checkbox"/> has abandoned the child | <input type="checkbox"/> is incarcerated |
| <input type="checkbox"/> does not live with the child due to neglect and/or abuse | <input type="checkbox"/> is deceased |
| <input type="checkbox"/> suffers from a serious illness | <input type="checkbox"/> has an active military assignment |

My relationship to _____ is that of _____.
(Name of Child or Caregiver) (Specify)

I solemnly affirm under the penalties of perjury that the contents of the foregoing are true to the best of my knowledge, information, and belief.

Signature of Attesting Professional _____ Date _____

Printed Name: _____ Title: _____

Organization: _____ Contact Phone: _____

Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Sworn Statement of Other Primary Caregiver



SY 2016-17 | Updated 3/16

SWORN STATEMENT OF OTHER PRIMARY CAREGIVER

This form is to be completed by a person seeking to enroll a student under the status of "other primary caregiver". It will serve as a sworn statement that the person enrolling the student is the "other primary caregiver" of that student. The facts given by the "other primary caregiver" may be verified after the child has been enrolled in the District of Columbia Public Schools, a District of Columbia public charter school, or other school providing educational services funded by the District of Columbia.

An "other primary caregiver" is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. For the purpose of this form, a parent is "unable to provide care and support" to a child if one of the conditions described in the check boxes below apply. A person seeking to enroll a student as an "other primary caregiver" shall provide documentation, such as this sworn statement, that establishes his or her status as an "other primary caregiver" as well as documentation that establishes his or her residency status as required by D.C. law and regulations.

I, _____, certify that I am a District of Columbia resident, with my primary place of residence at
(Other Primary Caregiver Name)

_____, I am the other primary caregiver of
(Address)

_____, who resides with me at the above referenced address in the
(Student Name)

District of Columbia. I am the child's primary caregiver because his/her parent, custodian or guardian,

_____, who currently resides at _____,
(Parent/Custodian/Guardian Name) (Parent/Custodian/Guardian Address; if applicable)

is unable to provide primary care and support because (check any that apply):

- | | |
|--|---|
| <input type="checkbox"/> he/she has abandoned the child | <input type="checkbox"/> he/she has an active military assignment |
| <input type="checkbox"/> he/she does not live with the child due to neglect and/or abuse | <input type="checkbox"/> he/she suffers from a serious illness |
| <input type="checkbox"/> he/she is incarcerated | <input type="checkbox"/> he/she is deceased |

If none of the above descriptions apply, please use another means listed under Part D of the DC Residency Verification Form to prove "other primary caregiver" status.

What is your relationship to the child? _____

On what date did the child come under your primary care and support? _____

I solemnly affirm under the penalties of perjury that the contents of the foregoing are true to the best of my knowledge, information and belief.

Other Primary Caregiver (Print) Other Primary Caregiver (Signature) Date

Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Home Visitation Residency Verification Form



SY 2016-17 | Updated 3/16

HOME VISITATION RESIDENCY VERIFICATION FORM

Name of Student: _____ Name LEA/School Name: _____

Address of Home Visit: _____

Date of Home Visit: _____ Primary Telephone Number of Residence: _____

Number of People Residing in the Home: _____

Name of People in the Home: 1. _____ Relationship to Student: _____
2. _____ Relationship to Student: _____
3. _____ Relationship to Student: _____
4. _____ Relationship to Student: _____

If no relationship, explain: _____

Primary Lease Holder: _____

Additional Names on Lease: _____

Is student on Lease? Yes _____ No _____ If no, why: _____

Number of Bedrooms: _____ Number of Beds/Sleeping Areas: _____

Contents of Closets (clothing, sizes, etc.): _____

Are personal items of parent(s)/other primary caregiver(s) and student visible? Yes _____ No _____

Please describe: _____

I certify that I am the Principal or Designee authorized by the named school to conduct a home visit for the student named above. I attest that the information herein provided is true to the best of my knowledge based on the home visit I have conducted, and that I have confirmed the residency of the student by conducting a home visit.

Name of Principal or Designee (Print)

Name of Principal or Designee (Signature)


Date

Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 Home Visitation Consent Form

SY 2016-17 | Updated 3/16



HOME VISITATION CONSENT FORM

This form must be completed by the parent, guardian or other primary caregiver who enrolled the student, or by the adult student him/herself.

I, (Print Name), as the (check one),

☐ parent, guardian or other primary caregiver of (Student Name) OR

☐ adult student him/herself do hereby consent for (LEA Name) to conduct a home visit for the purpose of validating my D.C. residency.

Personal information that may be collected in connection with this visit is to be retained in the official record of the student and will not be transferred or disclosed outside of the school, Local Education Agency or State Education Agency, except where disclosure is required by law or is pursuant to the verification of my DC Residency. This information will be used for the purpose of validating D.C. residency of the student's parent, guardian, or other primary caregiver, or of the adult student him/herself.

Is permission for the home visit granted? ☐ Yes ☐ No

If no, a home visitation cannot be conducted by the school and you will be required by law to prove D.C. residency by other means.

Home Address of Parent/Guardian/Other Primary Caregiver or Adult Student:

Street:

City: State: Zip Code: Telephone Number:


Name of Person Consenting to Home Visit (Print)	Name of Person Consenting to Home Visit (Signature)	Date
Name of Principal or Designee (Print)	Name of Principal or Designee (Signature)	Date

Penalty for False Information:

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.

2016-17 McKinney Vento Form

SY 2015-2016 | Updated 3/15


Transitory Services (Education of Homeless Children and Youth Program)
(202) 654-6123 | Fax: (202) 299-2136 | www.osse.dc.gov

**Title X Part C McKinney-Vento
Confidential Referral Form**

School Name: _____ Date: _____

Student: _____ M/F: _____

Grade: _____ Unique Student Identifier Number (USI): _____

Age: _____ Birth Date: _____ Phone Number: _____

Temporary Address: _____ City: _____ Zip: _____

Last School Attended: _____ School ID Number: _____
[School of Origin]

Location of School: _____
[City] [State] [Zip]

Referring Person: _____ Position: _____

Please check all that apply for the following areas of concern relevant to the student:

<p>Areas of Concern or Services Needed (check all that apply):</p> <p>Student is unable to pay school fees _____</p> <p>Immunizations are needed _____</p> <p>Excessive absences _____</p> <p>Lacks academic records/documents _____</p> <p>Experiencing academic delays _____</p> <p>In need of school supplies _____</p> <p>In need of school transportation _____</p> <p>In need of resource referrals _____</p> <p>In need of medical attention _____</p> <p>In need of clothing/uniforms _____</p> <p>In need of academic assessment _____</p> <p>Possesses a current I.E.P. (SPED) _____</p>	<p>Night Time Residency Status (You must select one of the following):</p> <p>Doubled-Up (living with someone temporarily) _____</p> <p>Sheltered (living in a community or domestic violence shelter, transitional housing or Awaiting Foster Care) _____</p> <p>Unsheltered (on the streets/unfit building) _____</p> <p>Hotel/Motel _____</p> <p>Student Status (check all that apply):</p> <p>Unaccompanied (guardian not with student) _____</p> <p>Homebound _____</p> <p>Migratory _____</p>
---	--

IDEA _____ ELL/ESL _____ 504 _____ Other: _____

Other children in the home (list names and ages): _____

_____ Electronically submitted to OSSE _____ Copy attached to enrollment forms

For more information please contact:

► **Nicole Lee-Mwandha** Homeless Education State Coordinator, transitory.services@dc.gov or 202.654.6123

Acceptable Forms of Documentation

Acceptable Forms of Documentation

Part A (One is needed from this list to verify residency.)

- **Pay stub:** Issued within the forty-five (45) day window immediately preceding the school's review of residency documentation, that contains the name of person enrolling the student or the name of the adult student, shows his/her current DC home address, and shows withholding of DC personal income tax for the current tax year.
- **Unexpired official documentation of financial assistance from the Government of the District of Columbia:** Issued to the person enrolling the student or the adult student within the past twelve (12) months and be current at the time presented to the school, including, but not limited to, Temporary Assistance for Needy Families (TANF), Medicaid, the State Child Health Insurance Program (SCHIP), Supplemental Security Income, housing assistance or other programs.
- **Certified copy of Form D40:** Certified by the DC Office of Tax and Revenue, with the name of person enrolling the student or the name of the adult student as evidence of payment of DC taxes for the current or most recent tax year.
- **Military housing orders:** Showing the name of the person enrolling the student or the name of the adult student, and their residency or home address in DC, including but not limited to a DEERS statement or other official communication on military letterhead.
- **Embassy letter:** Issued within the past twelve (12) months showing the name of the person enrolling the student or the name of the adult student, indicating that the caregiver and the dependent student or the adult student currently live on embassy property in the District of Columbia or will reside on DC property confirmed by the embassy during the relevant school year, and an official embassy seal.

Acceptable Forms of Documentation

Part B (Two are needed from this list to verify residency. The address and name on each of the items must be the same.)

- Unexpired **DC motor vehicle registration** showing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.
- Unexpired **lease or rental agreement with proof of payment of rent**, in the name of the person enrolling the student or the name of the adult student, for a period within two (2) months immediately preceding the school's review of residency documentation, for the current DC address at which the student actually resides.
- Unexpired **DC motor vehicle operator's permit** or official government issued non-driver identification in the name of the person enrolling the student or the name of the adult student showing his/her current DC home address.
- **Utility bill (*only gas, electric, and water bills are acceptable*) with proof of payment of a bill**, from a period within the two (2) months immediately preceding the school's review of residency documentation, listing the name of the person enrolling the student or the name of the adult student and his/her current DC home address.

Acceptable Forms of Documentation

Part C (If one of these applies, no signature is required in Part C.)

- **Homeless:** There is evidence that the student is homeless and the school's homeless liaison has provided the appropriate homeless documentation.
- **Ward of the District of Columbia:** Proof that child is a ward of the District of Columbia, in the form of a court order or official documentation from DC Child and Family Services Agency.

Admission of Non-Resident Students: The Tuition Collection Process

Admission of Non-resident Tuition-Paying Students

- ❖ A non-resident student is defined as a student seeking admission to the D.C. Public Schools who does not meet any of the criteria for tuition-free instruction.
- ❖ Prior to the admission of a non-resident student, a tuition agreement and initial payment are required to be received by OSSE.
- ❖ OSSE collects tuition for all LEAs including DCPS.

Tuition Collection Process Flow

Tuition Collection Process

1. LEA must vet waitlist to ensure there are no DC residents on the waitlist.
2. LEA sends non-resident parent or adult student information to OSSE prior to admitting student to school.
3. OSSE will send tuition agreements to the parents.
4. Parent or adult student will return the tuition agreement and initial payment to OSSE.
5. LEA allows student to attend class once the tuition agreement and initial payment are received by OSSE.

Note: OSSE will manage tuition collection process throughout the school year.

LEA vets
waitlist for DC
residents.

If no DC residents
are on the waitlist,
LEA sends OSSE
parent information.

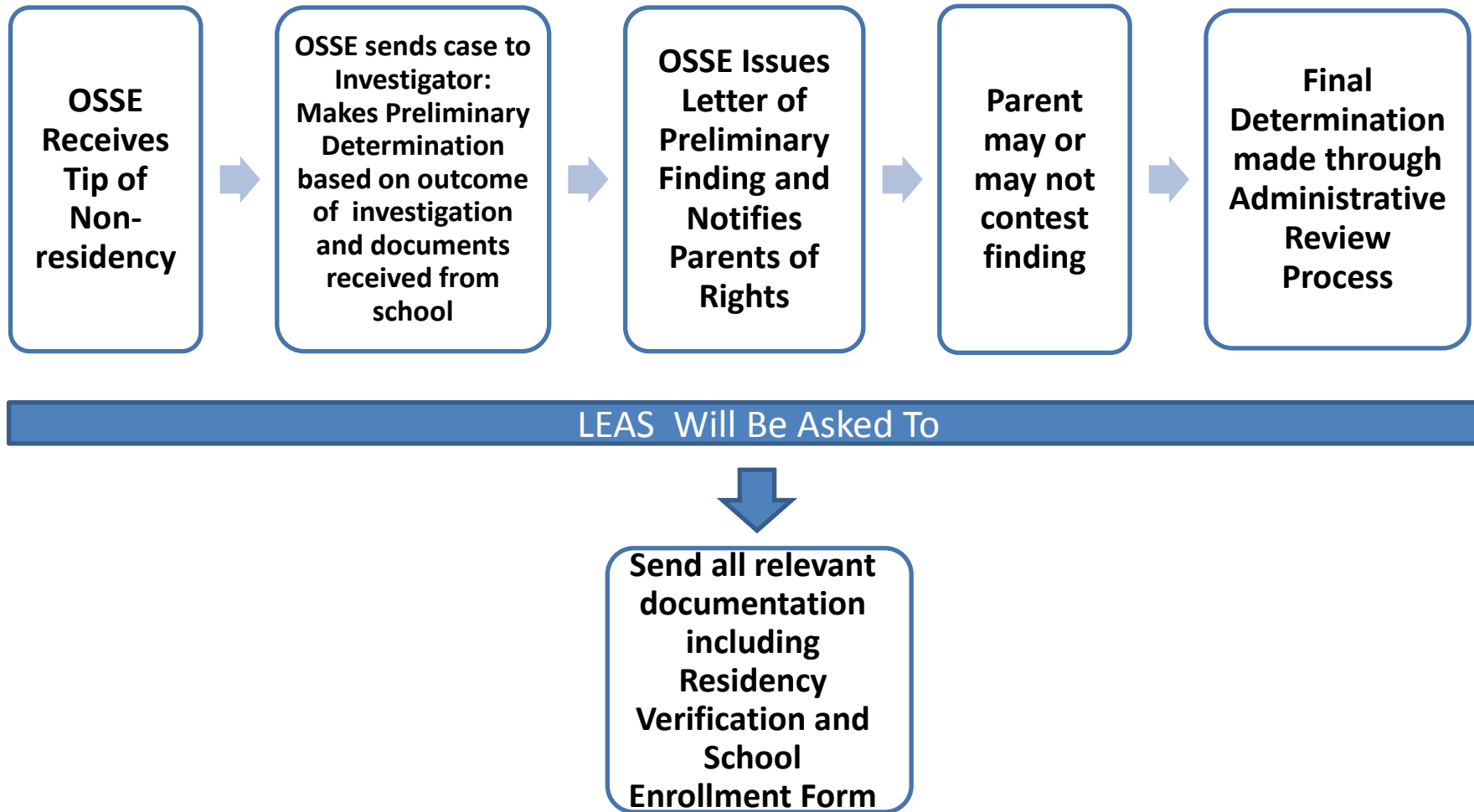
OSSE issues
Tuition Agreement
to parent.

Parent returns
tuition agreement
and payment to
OSSE.

School allows
student to
attend class.

Residency Fraud Prevention Overview

Residency Fraud Prevention Overview



Responsibilities of LEA/CBO

What is the role of the school official in terms of residency verification?

- The school official is to review the documentation and verify that the documentation meets the RV requirements.
- Ensure the person enrolling the student is the parent, legal guardian, other primary caregiver, or the adult student him/herself with documents to verify that.

Note: All official DC government documents should speak to the services being rendered and be current at the time presented.

What happens when school official participates in Residency Fraud?

- The school official may receive not more than \$2,000 or imprisonment for not more than 90 days and also be subject to charges of retroactive tuition.

What is fraud on the face of the document?

- Fraud on the face of the document is blatant deception from a reasonable layperson's perspective. (i.e. doctored paystubs, outdated documents etc.)

What happens when the school accepts documents from someone other than the parent/guardian? (i.e. grandma/aunt/cousin)

- If this person isn't the "other primary caregiver," they are participating in Residency Fraud and may be subject to the penalties.

Submitting Residency Fraud Tips

Method #1

Residency Fraud Hotline

202-719-6500

Methods #2

Residency Fraud Online Form

<http://dcforms.dc.gov/webform/osse-residency-fraud-prevention-form>

Information Needed to Make a Report

- Student's full name
- School name
- Parent's information (name, vehicle tag, etc.)
- Reason for non-residency suspicion

Recap of Changes to DCRV Form

- Only Page 1 is required to be completed in most cases (except other primary caregiver).
- Clarified wording pertaining to document requirements.
- Added an Acceptable Document Checklist.
- Incorporated wording to specifically address adult students.
- Reduced the number of times the parent's name appears on the form to eliminate the potential for conflicting information.
- However, the allowable supporting documents remain the same.



Questions?

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